



**1. Contact Information**

**Business**

**Name:** \_\_\_\_\_ Business phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
 Business Location: \_\_\_\_\_ Business fax: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Tax ID #: \_\_\_\_\_

**Borrower's**

**Name:** \_\_\_\_\_ Home phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
 Home Address: \_\_\_\_\_ Work phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email address: \_\_\_\_\_

Previous Address (If less than 1 year at current address): \_\_\_\_\_  
 Names credit could be under: \_\_\_\_\_  
 Social Security #: \_\_\_\_\_ Drivers license # \_\_\_\_\_ Date of birth: \_\_\_\_\_

Have you sought funding for this loan from a bank or other financial institution? If yes, where and what were the results?

**2. Business Information**

Time owning business: \_\_\_\_\_ Years: \_\_\_\_\_ Months: \_\_\_\_\_ Ownership:  Individual  Partnership  
 Corporation  Non-Profit

Business Location:  Home  Storefront  Market  Street  Other (Explain) \_\_\_\_\_

Website: \_\_\_\_\_

Sales in best month: \$ \_\_\_\_\_ Month: \_\_\_\_\_ Worst month: \$ \_\_\_\_\_ Month: \_\_\_\_\_

Is your business seasonal?  yes  no

Where does the business get its raw materials or supplies? \_\_\_\_\_

How do you pay for them?  credit  cash  net 30/60/90  other (explain): \_\_\_\_\_

**Description of business:**

\_\_\_\_\_

How much of your own funds have you invested (or plan to invest) in this business venture or project? \_\_\_\_\_

**3. Loan Information**

Loan amount requested: \$ \_\_\_\_\_

Approximate monthly payment you would feel comfortable with: \$ \_\_\_\_\_

Dollar amount	Purpose of loan (please break down purpose of loan by cost)
\$	
\$	
\$	
\$	

What is the minimum loan amount you can work with and what will the purpose be:

Dollar amount	Purpose of loan (please break down purpose of loan by cost)
\$	
\$	
\$	
\$	

**4. Landlord Information:**

Are you a home owner?  Yes /  No

Home Landlord's Name: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Time at current residence:                      Years: \_\_\_\_                      Months: \_\_\_\_                      Fax #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Business Landlord's Name: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Time at current location:                      Years: \_\_\_\_                      Months: \_\_\_\_                      Fax #: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

**5. Employment Information**

If employed, Name/address of employer: \_\_\_\_\_

Phone # (\_\_\_\_) \_\_\_\_ - \_\_\_\_                      Fax# (\_\_\_\_) \_\_\_\_ - \_\_\_\_                      Income : \$\_\_\_\_per month (approx.)

**6. Financial Information**

**Business Assets** (materials, inventory, machinery, accounts receivable, furniture, fixtures, vehicles, etc.)

Item	Value	Own free and clear
1.	\$	<input type="checkbox"/> Yes / <input type="checkbox"/> No
2.	\$	<input type="checkbox"/> Yes / <input type="checkbox"/> No
3.	\$	<input type="checkbox"/> Yes / <input type="checkbox"/> No
Total:	\$	

**Business Liabilities** (All business debts; such as vehicles, accounts payable, loans with other lenders, banks, suppliers, etc.; We need the total balance of any loans or debts.)

Item	Monthly Payment	Owed to	Balance
1.	\$		\$
2.	\$		\$
3.	\$		\$
Total:	\$	Total:	\$

Total Owner's Equity (Assets – Liabilities)                      Total: \$

**What collateral will be used to secure this loan (Detail on separate sheet page if necessary)**

Item	Resale	Own free and clear?
	\$	
	\$	
	\$	
	\$	

## Monthly Financials

Personal Financials		
<b>1. Income</b>		<b>Monthly</b>
	Take home from business	
	Spouse's income	
	Applicant's employment income	
	Any other income	
	<b>Total Personal Income</b>	
<b>2. Personal Expenses</b>		
	Education and Childcare	
	Food & Clothing	
	Child Support / Alimony	
	Utilities	
	Insurance, Gasoline, Miscellaneous	
	Home Rent/Mortgage	
	Credit card payments	
	Vehicle and Other Loan payments	
<b>Monthly Business Financials</b>		
Existing <input type="checkbox"/> Projected <input type="checkbox"/>		
<b>1. Income</b>		<b>Monthly</b>
	a. Gross Sales	
	b. Any Other Income	
	<b>Total Business Income</b>	
<b>2. Business Expenses</b>		
	COGS- Raw Materials, Merchandise	
	Salaries/Labor	
	Insurance, Gasoline, Miscellaneous	
	Utilities	
	Business Rent/Mortgage	
	Credit card payments	
	Vehicle and Other Loan payments	
	<b>Total Business Expenses</b>	
	<b>Gross Business Surplus</b>	
	<b>Owner's Draw</b>	
	<b>Net Business Surplus</b>	

## 7. Co-Borrower's Information

Co-Borrower's  
Name: \_\_\_\_\_

Home phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Address: \_\_\_\_\_

Work phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email address: \_\_\_\_\_

Previous Address (If less than 1year): \_\_\_\_\_

Names credit could be under: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Drivers license # \_\_\_\_\_ Date of birth: \_\_\_\_\_

## 8. Bank Account Information

Do you have a bank account? yes no    If yes, personal business both    Type of Account checking savings both

## 9. Credit Information

If you presently have an active bankruptcy you do not qualify for a loan under our program's guidelines. If you have successfully completed your bankruptcy plan, please provide us with your discharge papers. Thank you.

Have you ever filed for bankruptcy? yes no  
Is it active? yes no

If you presently show past due or slow pay in child support accounts you do not qualify for a loan under our program's guidelines. If you are under a payment plan and in compliance with it, please provide us with proof of payments. Thank you.

Are you showing slow pay in child support?  
yes no not applicable  
Can you prove that you are current?  
yes no

If you presently delinquent in your mortgage and/or your vehicle account you do not qualify for a loan under our program's guidelines. If you have proof that these accounts are current, please provide supporting information. Thank you.

Are you currently showing slow pay in your mortgage and/or vehicle accounts? yes no  
Can you prove that you are current? yes no

If you presently delinquent paying government obligations you do not qualify for a loan under our program's guidelines. If you have proof that these accounts are current, please provide supporting information. Thank you.

Are you current on all business, personal taxes, and other government obligations (including income taxes, sales taxes, payroll tax, student loans, etc.)?  
yes no

## 10. Socio-Economic Information (Optional – For Statistical Purposes Only)

- a) Gender: Male Female
- b) Marital status: Married Unmarried Separated
- c) Total years of education completed: \_\_\_\_\_
- d) Number in household including yourself: \_\_\_\_\_
- e) Veteran: Yes No
- f) Ethnic Background: Hispanic African American Caucasian Native American  
Asian American Other \_\_\_\_\_

## 11. Referral information

How did you hear about  
Colorado Enterprise Fund?

Source (bank, SBA, SBDC, etc.)

Name of Referral Contact

## 12. Personal References

(1). Name \_\_\_\_\_ Address \_\_\_\_\_ Contact number \_\_\_\_\_

Relationship \_\_\_\_\_

(2). Name \_\_\_\_\_ Address \_\_\_\_\_ Contact number \_\_\_\_\_

Relationship \_\_\_\_\_

I attest that all of the information on this application is true. I authorize Colorado Enterprise Fund to investigate and verify the above information, and contact any references regarding this application. I also authorize Colorado Enterprise Fund to perform a credit check, which may include obtaining consumer and/or commercial credit reports and to exchange information about credit experience with other creditors from time to time, as authorized by law. The release of all information by Colorado Enterprise Fund in any manner, is hereby authorized whether such information is of record or not and I hereby release all persons, agencies, firms, companies, etc., from any damages resulting from such information. I understand that Colorado Enterprise Fund will retain this application whether the loan is approved or denied and that I can appeal Colorado Enterprise Fund decision if the loan is denied.

Signature of Borrower: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Co-borrower: \_\_\_\_\_ Date: \_\_\_\_\_

Person conducting intake: \_\_\_\_\_ Date: \_\_\_\_\_

### **EQUAL CREDIT OPPORTUNITY ACT**

The Federal Equal Opportunity Act prohibits creditors from discriminating against applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided that the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administrates compliance with this law concerning this creditor is the Federal Trade Commission, Equal Credit Opportunity, Room 500, 633 Indiana Avenue, N.W., Washington, DC 2058